

R E M A R K S

1. Reconsideration and further prosecution of the above-identified application are respectfully requested in view of the amendments and discussion that follows. Claims 1-14 are pending in this application. Claims 12 and 14 have been rejected under 35 U.S.C. §112, second paragraph. Claims 1-4 and 13 have been rejected under 35 U.S.C. §102(b) as being anticipated by U.S. Patent No. 5,876,351 to Rhode. Claim 5 has been rejected under 35 U.S.C. §103(a) as being obvious over Rhode in view of U.S. Patent No. 6,292,692 to Skelton et al. Claims 6-12 and 14 have been rejected under 35 U.S.C. §103(a) as being obvious over Rhode in view of U.S. Patent No. 6,141,584 to Rockwell et al. After a careful review of the claims, as amended, it is believed that the rejection is improper and should be withdrawn.
2. Claims 12 and 14 have been rejected under 35 U.S.C. §112, second paragraph. In response, the antecedent linkage of claims 12 and 14 has been corrected.
3. Claims 1-4 and 13 have been rejected as being anticipated by Rhode. However, claim 1 is limited to "an acquisition element adapted to be coupled to a patient through a set of relatively short leadwires; and a hand-held, battery powered portable processing element coupled to the acquisition element through a connector cable and controlled through a graphical user interface". In contrast, Rhode is constructed of a single unit that includes Nintendo Gameboy 10 and an ECG Boy Cartridge 13 inserted into a slot 17 of the Gameboy 10. Further, the acquisition element and processing element of the claimed invention provide a functionality that is not recognized or even possible under the system of Rhode.

For example, in use, the unitary Gameboy 10 and cartridge 13 of Rhode would normally have to be held in the hands of operator of the Rhode system in order for the operator to comfortably observe the ECGs of the patient. In order to be held by an operator, the Rhode unitary device would require the use of relatively long leads between the Rhode unitary device and the patient. Not only would the leads of the Rhode unitary device need to be long enough to allow the operator to stand near the bed, but the leads would also have to be long enough to allow the operator to place the Rhode unitary device on a nightstand of the patient.

In contrast, the claimed invention only requires a set of relatively short leads between the patient and acquisition element. The short leads and features of the acquisition element and processing element, allow the claimed invention to comply with applicable medical safety and performance standards (e.g., IEC601-1, AAMI EC11, etc.). The unitary device of Rhode makes no such claim.

In addition, the claimed invention offer superior performance over prior art devices for a number of reasons. "For example, fabrication of the system 10 as a two part unit allows the acquisition unit 12 to be placed directly on (or near) the chest of the patient, thereby greatly reducing the length of the leadwires 16. Reducing the length of the leadwires has been found to significantly reduce the incidence of electromagnetic interference (EMI). Further, by separating the acquisition function from the processing and display function, the acquisition unit 12 may be made smaller and used more comfortably in closer proximity to the body of the patient." (specification, paragraph [0011]. Again, the unitary device of Rhode makes no such claim.

Further, the "set of relatively short leadwires" are well-

defined claim elements that would be clearly understood by those of skill in the art to differentiate the Rhode unitary device from that of the claimed invention. For example, the term "relatively short" in the context of claim 1 would be understood to be of a length that would allow the acquisition element to reside on the chest of the patient (as shown in FIG. 1). In addition, the length of the leads 16 of FIG. 1 of the specification between the acquisition unit 12 and the head of the patient would only need to be a few inches long. Other leads 16 would only need to be of a short additional distance from the chest to the lead attachment point. Consequently, the term "relatively short" would have a well-defined meaning that would be well understood to those of skill in the art. The relatively short leadwires clearly differentiate the claimed invention from the relatively long leads of the prior art and particularly from the leads shown in Rhode.

In summary, claims 1-4 and 13 are clearly differentiated from Rhode. On a first level, claims 1-4 and 13 are differentiated by the acquisition unit being coupled to the patient through the use of the set of relatively short leadwires.

On a second level, claims 1-4 and 13 are differentiated by the fact that the portable processing element is coupled to the acquisition element through a connector cable. On a third level, Rhode is a unitary device, whereas the claimed invention is limited to an acquisition element and a processing element. None of these elements is shown in Rhode. Further, these elements would not be obvious because Rhode does not recognize the advantages of the relatively short leadwires.

Since Rhode fails to teach these specific claim elements, claims 1-4 and 13 are clearly differentiated over Rhode. Since claims 1-4 and 13 are clearly differentiated over Rhode, the rejections are believed to be improper and should be withdrawn.

4. Claim 5 has been rejected as being obvious over Rhode in view of Skelton et al. However, Skelton, as with Rhode, uses a unitary medical treatment device 10. In addition, and for the same reasons, the leads of Skelton are relatively long. As such, the combination of Rhode and Skelton fail to teach each and every claim limitation as required by MPEP §2143.03. Since the combination does not teach each and every claim limitation, the rejection is believed to be improper and should be withdrawn.

5. Claims 6-12 and 14 have been rejected as being obvious over Rhode in view of Rockwell et al. However, Rockwell et al., as with Rhode, uses a unitary medical treatment device 10. For the same reasons, the leads of Rockwell et al. are relatively long.

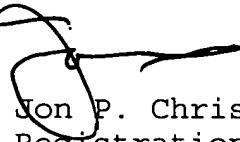
In addition, the acquisition element of the claimed invention would be understood to have a clearly defined meaning within the context of the claimed invention. In the exemplary embodiments described in paragraphs [0015]-[0017], the acquisition element functions to acquire the essential characteristics of the ECG signals and convert the signals to a form that is not affected by environmental factors. Since the acquisition element has a clearly defined function under the claimed invention, it is not the same as or equivalent to leads or other connector devices of the prior art.

As such, the combination of Rhode and Rockwell et al. fail to teach each and every claim limitation as required by MPEP §2143.03. Since the combination does not teach each and every claim limitation, the rejection is believed to be improper and should be withdrawn.

6. Allowance of claim 1-14, as now presented, is believed to be in order and such action is earnestly solicited. Should the Examiner be of the opinion that a telephone conference would expedite prosecution of the subject application, he is respectfully requested to telephone applicant's undersigned attorney.

Respectfully submitted,
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